2	
3	
ϕ	

PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2000 Application or Docket Number 9/93279/ 1-8-5-3													
CLAIMS AS FILED - PART I (Column 1) (Column 2)							SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY			
TOTAL CLAIMS			AT					RATE	E	FEE	1	RATE	FEE
FOR			NUMBER FILED NUMBER			ER EXTRA		BASIC F	FEE	355.00	OR	BASIC FEE	710.00
TOTAL CHARGEABLE CLAIMS			## Tminus 20= *		34		X\$ 9=			OR	X\$18=	186	
INDEPENDENT CLAIMS			minus 3 =				X40=			OR	X80=	80	
MU	LTIPLE DEPEN	IDENT CLAIM P	PRESENT				+135=		OR	+270=	-SIV		
* If the difference in column 1 is less than zero, enter "0" in column 2						1	TOTA	L		OR	TOTAL	1926	
CLAIMS AS AMENDED - PART II							CMAI.		NTITY	OR	OTHER SMALL		
_		(Column 1) CLAIMS		(Colur HIGH		(Column 3)	1 1	DIVINE		ADDI-		JUINCE	ADDI-
AMENDMENT A		REMAINING AFTER AMENDMENT		NUM PREVIO PAID	DUSLY	PRESENT EXTRA		RATE	=	TIONAL FEE		RATE	TIONAL FEE
₩Q.	Total	. 38	Minus	** 4	47	=		X\$ 9=	=		OR	X\$18=	
ME	Independent	· 3	Minus	***	4	= -		X40=]		OR	X80=	
Y	FIRST PRESE	NTATION OF M	JLTIPLE DEF	PENDENT	CLAIM				┪				
								+135			OR	+270=	
			=				,	TOT. Addit. Fi			OR	TOTAL ADDIT. FEE	
(Column 1) (Column 2) (Column 3) CLAIMS HIGHEST											<u> </u>		
MENDMENT B	·.	REMAINING AFTER AMENDMENT	<u> 301 - 111</u>	NUM PREVIO PAID	BER	PRESENT - EXTRA		RATE		ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
Ş	Total	• .	Minus	**		=		X\$ 9=	-		OR	X\$18=	
W	Independent	*	Minus	***		=		X40=	.	•	OR	X80=	
	FIRST PRESE	NTATION OF MI	ULTIPLE DEF	PENDENT	CLAIM		1	+135=	_		OR	+270=	
			•					TOT			OR	TOTAL	
	1	(Column 1)	g."	(Colur	mn 9\	(Column 3)	_	ADDIT. FI	ee L			ADDIT. FEE	
T.,		CLAIMS		HIGH	EST		1 1		1	ADDI-	-		ADDI-
AMENDMENT C		REMAINING AFTER AMENDMENT		NUM PREVIO PAID	DUSLY	PRESENT EXTRA		RATE		TIONAL FEE		RATE	TIONAL FEE
Š	Total	•	Minus	••		=		X\$ 9=	-		OR	X\$18=	
REP	independent	•	Minus	***		=		X40=				X80=	
	FIRST PRESE	NTATION OF M	ULTIPLE DE	PENDENT	CLAIM]		-		OR		<u> </u>
	MAR		ha ambarin a-b		, 40° in	lumo 3		+135=			OR	+270=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, nter "20." ****If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.													

FORM PTO-875 (Rev. 8/00)